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Alexandria, VA 22313-1450****FROM:****Ralph D'Alessandro  
Reg. No. 28,838  
Attorney for Applicants****PHONE:****FAX:****(703) 872-9310****PHONE:****661-295-5600 x2404****FAX:****661-257-4953****Documents Transmitted:****Amendment Transmittal; Second Preliminary  
Amendment.****Applicant(s):****Kenneth J. Newell, Stephen A. Ruatta, John S.  
Stockwell****Appl. No.:****10/815,510****Filed:****April 1, 2004****Group Art Unit:****1732****Examiner:****To be determined****3D Systems Docket No.:****USA.286-2**


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<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>					Docket No. USA.286-2	
Applicant(s): Kenneth J. Newell, Stephen A. Ruatta, John S. Stockwell						
Application No. 10/815,510	Filing Date April 1, 2004	Examiner To be determined	Customer No. 22514	Group Art Unit 1732	Confirmation No. 9370	
Invention: <b>POST PROCESSING THREE-DIMENSIONAL OBJECTS FORMED BY SELECTIVE DEPOSITION MODELING</b>						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application.						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						
The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	14 -	20 =	0 x	\$9.00	\$0.00	
INDEP. CLAIMS	3 -	4 =	0 x	\$43.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 20-0900 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.						
 Signature			Dated: June 22, 2004			
Ralph D'Alessandro, Reg. No. 28,838 Attorney for Applicant  3D Systems, Inc. 26081 Avenue Hall Valencia, CA 91355			I certify that this document and fee is being deposited on with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450.  _____ Signature of Person Mailing Correspondence  _____ Typed or Printed Name of Person Mailing Correspondence			
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